Approved for use through 01/31/2004. OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:		Attorney Docket No.	5217,61003				
Assistant Commissioner for Patents			First Named Inventor	Michael A. Jone			
Box Reiss		Original Patent Number	5,975,892				
Washingto	on, DC 20231	Original Patent Issue Date (Month/Day/Year)	11/02/1999				
<u> </u>		Express Mail Label No.	EL916899436US				
APPLICATION FOR (Check applicable	I X	Design Patent Plant Patent					
APPLICATION	ELEMENTS (37 CFR 1.1	ACCOMPANYING APPLICATION PARTS					
	Form (PTO/ SB/ 56) and a duplicate for fee processing)			tatus and support for all changes			
2. X Applicant claims	s small entity status. See 37 CFR	R 1.27.		See 37 CFR 1.173 (c). Patent for surrender			
	d Claims in double column copy d, if appropriate)	Ribboned Original Patent Grant					
(posed amendments, if appropria	Statement of	Loss (PTO/SB/55)				
Reissue Oath/D	eclaration (original or copy) 75) (PTO/SB/51 or 52)	12. Foreign Priority Claim (35 U.S.C. 119) (if applicable)					
6. Power of Attorne	·		13. Information Dis Statement (IDS				
7. Original U.S. Patent of		English Translation of Reissue Oath/Declaration (if applicable)					
(If Yes, check applical	((ir applicable)				
	t of all Assignees (PTO/SB/53)	15. Preliminary Am	endment				
37 C.F.R. § 3.7 (PTO/SB/96)	3(b) Statement	16. X Return Receipt Postcard (MPEP 503)					
8. CD-ROM or CD	O-R in duplicate, Computer Progra	(Should be specifically itemized)					
or large table	A-: 40	17. Other:	••••••••				
(if applicable, all of the	no Acid Sequence Submission following are necessary)	••••••					
a. Computer Re	adable Form (CFR)	••••••					
b. Specification Seque							
ii □ paper	2 copies) or CD-R (2 copies); or						
c. Statements ve	rifying identity of above copies						
	18. CORRESPO	ONDENCE AD	DRESS				
Customer Nur	mber or Bar Code Label			rrespondence address below			
		Customer No. or Attach		rrespondence address below			
Name An	tonio R. Durando						
A001033	rando Birdwell & Ja		***************************************				
2929 E. Broadway Blvd.			Zip Code	85716			
City Tu	cson	AZ Fax	520-881-9448				
Country US		State Telephone	520-881-9442				
NAME (Print/Type)	Antonio R, Duran	Registration No. (Attorney/Agent)	28,409				
Signature Signature		Date	11/2/21				

Signature

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20201. 20231.

PTO/SB/50 (02-01)

PTO/SB/56 (02-01)
Approved for use through 01/31/2004. OMB 0651-0033
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pape	rwork Reduction Act of 1	995, no p	ersons are requi	ired to re	espond to a c	ollection of info	mation un	less it	displays a valid	OMB control number		
REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 5217.61003						
Claims as Filed - Part 1												
Claims in Number Filed in (3) Small							Entity Other than a Small Entity					
Patent		Reissue Application		Number Extra		Rate	Fee		Rate	Fee		
(A) 19	Total Claims (37 CFR 1.16(j))	(B)	(B) 42		22 =	x \$ _9_=	198		x \$=			
(C) 1			(D) 5		4 =	x\$_42=	168	8 or	x \$=			
		\$ 370			\$							
					Total Filing Fee				OR	\$		
Claims as Amended - Part 2												
	(1)		(2) (3) Sm			Small E	nall Entity		Other than a Small Entity			
	Claims Remaining After Amendment		Highest Nur Previous Paid Fo	ly.	Extra Claims Present	Rate	Fee		Rate	Fee		
Total Claims (37 CFR 1.16(j)	***	MINUS	**		* 11	x \$=			x \$=			
Independent Claims (37 CFR 1.16(i))	***	MINUS	****		=	x \$=			× \$=			
. Total Additional Fee									OR	\$		
* If the entry in (D) is less than the entry in (C), Write "0" in column 3.												
** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.												
*** After any cancellation of claims.												
**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).												
***** *Highest Number of Independent Claims Previously Paid For* or Number of Independent Claims in Patent (C). X Applicant claims small entity status. See 37 CFR 1.27.												
	ge Deposit Account N					in th	e amour	t of				
	copy of this sheet is e						ic amoun	0		·		
The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 02-2451. A duplicate copy of this sheet is enclosed.												
X A check in the	ne amount of \$			_ to co	over the filin	g / additional	fee is en	closed	l .			
Payment by credit card. Form PTO-2038 is attached.												
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
1// 2/0) Date	<u>1</u> -				- (Signature of	f Applicar	nt, Atto	orney or Ager	at of Record		
*	Antonio R. Durando											
	Typed or printed name											

APPLICANT: JONES, MICHAEL A.

DOCKET NO.: 5217.61003

SERIAL NO.: 09/199,908

FILED: 11/25/98

PATENT NO.: 5,975,892

ISSUED: 11/02/99

TITLE: PNEUMATIC FLASH CALCINER THERMALLY INSULATED IN FEED

STORAGE SILO

Box Reissue

Durando Birdwell & Janke PLC

Director - USPTO 2929 E. Broadway Blvd. Washington, D.C. 20231 Tucson, Arizona 85716

520-881-9442

520-881-9448 Fax

CERTIFICATE OF MAILING

Increby certify that this correspondence is being deposited with the United States Postal Service utilizing the "EXPRESS MAIL POST OFFICE TO ADDRESSEE" service, mailing label number EL916899436US, under 37 CFR 1.10 in an envelope addressed to: Box Reissue, Director - U.S. Patent and Trademark Office, Washington, D.C. 20231, on the 201 day of November,

Kathleen C. Tennant

Enclosed are:

. \$45

In the report of

[X] Itemized return postcard.

[X] A check in the amount of \$736 to cover the filing fee.

[X] Reissue Patent Application Transmittal

[X] Reissue Application Fee Transmittal Form (in duplicate)

[X] Reissue Application Declaration by the Inventor

[X] Reissue Patent Application and Amendment

[X] Specification, Claims and Abstract (copy of patent)

[] Statement Under 37 CFR 3.73(b).

[] An assignment agreement and recordation cover sheet.

[] Nonpublication Request Under 35 U.S.C. 122(b)(2)(B)(i)

[X] Three sheets of drawings.

[] __ photographs submitted as informal drawings for reference purposes only.

[X] An information disclosure statement.

[] Copy of priority document.